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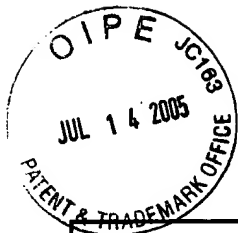
TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/328,828
	Filing Date	June 8, 1999
	First Named Inventor	Samuel Galpin
	Art Unit	2195
	Examiner Name	K. Tang
Total Number of Pages in This Submission	Attorney Docket Number	102314-0082

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Applicant Initiated Interview Request Form (1 page)
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	Certificate of Mailing under 37 C.F.R. 1.8 (1 page)
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	Return Receipt Postcard (1 page)
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	NUTTER MCCLENNEN & FISH LLP		
Signature			
Printed name	Jeffrey J. Duquette		
Date		Reg. No.	45,487

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Transmittal	
I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MSAF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	
Dated: July 12, 2005	Signature: (Jeffrey J. Duquette)



Applicant Initiated Interview Request Form

Application No.: 09/328,828 First Named Applicant: Samuel Galpin
Examiner: K. Tang Art Unit: 2195 Status of Application: FILED CASE

Tentative Participants:

(1) Examiner Tang (2) David Powsner
(3) Jeffrey Duquette (4) _____

Proposed Date of Interview: mid July Proposed Time: At the Examiner's Convenience (AM/PM)

Type of Interview Requested:

(1) ☒ Telephonic (2) ☐ Personal (3) ☐ Video Conference

Exhibit To Be Shown or Demonstrated: ☐ YES ☒ NO

If yes, provide brief description: _____

Issues To Be Discussed

Issues (Rej., Obj., etc)	Claims/ Fig. #s	Prior Art	Discussed	Agreed	Not Agreed
(1) <u>Rej.</u>	<u>Amended claims</u>	<u>Williams</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(4) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Continuation Sheet Attached

Brief Description of Arguments to be Presented:

Amendments to the claims.

An interview was conducted on the above-identified application on _____.

NOTE:

This form should be completed by applicant and submitted to the examiner in advance of the interview (see MPEP §713.01).

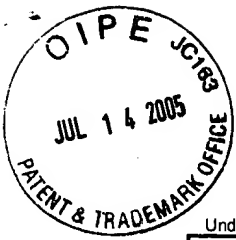
This application will not be delayed from issue because of applicant's failure to submit a written record of this interview. Therefore, applicant is advised to file a statement of the substance of this interview (37 CFR 1.133(b)) as soon as possible.

Jeffrey J. Duquette
Applicant's Representative Signature

Examiner/SPE Signature

Jeffrey J. Duquette
Typed/Printed Name of Applicant or Representative

45,487
Registration Number, if applicable



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Application No. (if known): 09/328,828

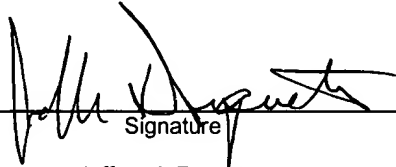
Attorney Docket No.: 102314-0082

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Jeffrey J. Duquette

Typed or printed name of person signing Certificate

45,487
Registration Number, if applicable

(617) 439-2680
Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Interview Request (1 page)